

## Application for a Water Right Permit

For Ecology Use (Date Stamp)

SEP 24 A9:19 Follow the attached instructions. Attach additional sheets as necessary. SEP 2 4 2012 GROUND WATER SURFACE WATER Water Sources Program PERMANENT SHORT TERM **TEMPORARY** Department of Ecology DROUGHT \*A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION. Section 1. APPLICANT ☐ I have participated in a pre-application conference with Ecology. Applicant/Business Name: Phone No: Other No: Wood And Address: State: City: Email Address (if available): blasdella tos. Contact Name (if different from above): Phone No: Other No: Jim Blasdell 503667-57N Relationship to Applicant: OWNER Address: RV. RP ewis State: Nash City: 98674 Email Address (if available): @ tds. Net Legal Land Owner or Part Owner Name of the Proposed Place of Use: Other No: Phone No: BLASdel 503-667-570 Address: City: State: Wa WoodLAMS Email Address (if available): blas dell Ecology SEPA: Exempt/Not Exempt Use ECY Coding: 001-001-WR1-0285-000011 Priority Date 7-2 2 By Date Returned Pre-application interviewer:

Section 2. STATEME	NT OF I	NTENT			
Do you own the land on which if no, do you have legal authori	ty to make the	his application for use of	of another's land?	YES NO	
Briefly describe the purpose of the Wood LAN	d m	x corse			
Anticipated length of time to co	mplete your	project: Temp/the  PeR manent  er will be applied to a be	rough Oct	and thewa	
Purpose(s) of Use	Cubic	(check one box only) c Feet per Second (CFS) ons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)	
Dust Control	500	GPM		Cont.	
Short Term/Temporary Water	er Use				
Is this a request for a short term Is this request for a temporary p If yes to either question above, FROM: // / // /26/2 TO	permit? X	ES NO dates that the water wil		_ TES _ NO	
Section 3. POINT OF (Complete A or B, and C bel		SION OR WITHI	DRAWAL		
A.) If Surface Water Sour	ce	B.) If	Ground Water	r Source	
☐ Spring ☐ Creek ☒ River ☐ Lake ☐ Other:			Well(s) Other:		
Source Name: Lewis Tributary to: Calum Di Number of proposed diversion	a points:	Numb Do yo If avai	u have an existing	oints of withdrawal: g well?  YES  NO er Well Report and pump test.	
Do you have an existing diver	sion? YE	S NO Well	Well Tag ID No.		

Parcel No.	1/4	1/4	Section	Township	Range		County
	32						
Lot(s)		Bloc	k(s)	S	ubdivision		
(C1	1:	- C4 C	41	4 - 6 1:		140 400 00000	
f known, enter the						to the nearest	section corner:
Feet ( \[ \] \]	North/X So	uth) and	1400 fee	et ( East/ East/	West)		
from the ( NW [	JSW NE	E SE	□) c	corner of Secti	on <u>/0</u> .		
Parcel No.	1/4	1/4	Section	Township	Range	PRO 3	County
			11	5N	15WN	Cowli	+2
Lot(s)		Bloc	k(s)	S	ubdivision		
701		0 0		0.11			<u> </u>
If known, enter the	distances in	n feet fro	om the poin	t of diversion	or withdrawa	il to the nearest	section corner:
900 feet (☐ Nor	th/X South	and	feet (	East/Wes	st)		
from the ( NW [							
OTE: If more than to	vo points of a	diversion/	withdrawal	attach addition	al information	on a separate si	neet of paper.
Note: PL	aceo?	D	i VERS	ION A.K	.A Le	WISRU	. Golt Doal
							20
	- Maria Caraca						2.0
Section 4. PL	ACE OF	USE					
Section 4. PL	ACE OF	USE	of the prop	perty (on whi	ch the water	will be used)	taken from a real
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Section 4. PL	ACE OF e legal desc operty deed	USE cription or title	of the propinsurance	perty (on whi	ch the water by it carefull	will be used)	taken from a real below.
Section 4. PL Attach a copy of the state contract, pro	ACE OF e legal desc operty deed	USE cription or title	of the propinsurance	perty (on whi	ch the water by it carefull	will be used)	taken from a real below.
Section 4. PL Attach a copy of the state contract, pro	ACE OF e legal desc perty deed  Section	Twp.	of the propinsurance	perty (on whi	ch the water by it carefull County	will be used) y in the space	taken from a real below.
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Section 4. PL Attach a copy of the state contract, pro	Section  Section  ands on wheegal authorite(s), address	Twp.	Range  proposed place  ke this appliance number	perty (on white policy, or contact of use is less ication for user:	County  County  ch the water  of another's	will be used) y in the space TES NO. land? YES	Parcel No.
Section 4. PL Attach a copy of the state contract, pro  1/4  1/4  Do you own all the state owner name Are there any other	Section  Section  ands on wheegal authorite(s), address	Twp.  ich the pay to make, and pherocelain	Range  Range  roposed plake this appliance number	ace of use is lo	County  County  coated? \[ \] Ye of another's	will be used) y in the space  TES \[ \] NO. land? \[ \] YES	Parcel No.
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ald be a 4" gas thrash og ga) Holding Tank		
PPLY SYSTEM INFORMATION		
B.) Municipal Water Systems only (defined under RCW 90.03.015)		
Present population to be served water:		
Estimate future population to be served:(20 year projection)		
e Washington State Department of Health, Drinking Water		
_ Water System Number:		
er system? YES NO		

Total number of acres requested to be		10		
NOTE: Outline the area to be irrigated to be irrigated.  2   ACR & Signature Stockwater		10	_ACRES	ova
List number and kind of stock:				
Is the proposed project for a dairy far	m? [] YES (VNO			
Other Proposed Farm Uses Describe all proposed uses:				
Family Farm Water Act (RCW 90.	66):			
<ul> <li>Acreage proposed to be irrigated</li> </ul>	er rights acquired after December 8, 1 ated under this application, and ated under other pending application	977,		
rannage proposes to so mile	area amer benoming approximant	(5).		
			NO	
Is the combined acreage under existing Do you have a controlling interest in	ng rights greater than 6000 acres?	YES 🗌		
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Is the combined acreage under existing Do you have a controlling interest in If yes, enter Permit No:	a Family Farm Development Permit  CR USES  and proposed capacity in kil	YES T	S 🗆 NO	
Is the combined acreage under existing Do you have a controlling interest in If yes, enter Permit No:	a Family Farm Development Permit  CR USES  and proposed capacity in kil	YES YES	S 🗆 NO	
Is the combined acreage under existin  Do you have a controlling interest in  If yes, enter Permit No:  Section 8. OTHER WATE  Hydropower  Indicate total feet of head  Describe works:  Indicate all uses to which power is to	a Family Farm Development Permit  CR USES  and proposed capacity in kil	YES THES	S 🗆 NO	
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Other Use				
Section 9. WATER	CTODACE			
Section 9. WATER	STURAGE			
Will you be using a dam, dik	e, or other structure	e to retain or store w	vater? YES 1	NO
Are you proposing to store m			ES NO	
Will the water depth be 10 fe				
If you answered yes to any o	f the above question	ns, please describe:		
NOTE: If you will be storing 10 and some portion of the storage Reservoir and a Dam Construct	will be above grade,	, you must also comple		
Section 10. DRIVIN	G DIRECTIO	ONS		
Provide detailed driving dire on ANY 503. NORTH Side of	tions to the project 150 yas	rt site: 5 mil Rds West RV. RD	of niemi	WoodLAND RROON
2000		000		
Site Address: 3232	Lewis	RVRP		
Woodland	m/x Pa	REK		

## Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Print Name (Applicant or authorized representa	Signature	Date	
Jim Blasdel	Jem Blan	dell 9-17-2013	
Print Name	Signature	Date	
(Legal Owner or Part Owner Place	of Use)		
	Jon Bla	sell 9-17-12	
Print Name	Signature	Date	
(Legal Owner or Part Owner Place	of Use)		
	Please check the region in	which the project is located:	
*Submit your application to:	Central Regional Office	Eastern Regional Office	
DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611	15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400	
OLYMPIA, WA 98504-7611	Northwest Regional Office 3190 – 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300	

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

